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CONFIRMATION NO. 6911

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| SERIAL NUMBER 10/534,866 | FILING or 371(c) DATE 10/31/2005 RULE | CLASS 600 | GROUP ART UNIT 3763 | ATTORNEY DOCKET NO. 2520-1058 | |
| APPLICANTS Filomena Zeoli, Sepino, ITALY; Mario Sozio, Latina, ITALY; ** CONTINUING DATA ***** This application is a 371 of PCT/IT03/00435 07/10/2003 ** FOREIGN APPLICATIONS ***** ITALY CB2002A000005 11/12/2002 ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY ** | | | | | |
| Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and /CHRISTOPHER KOHARSKI/ Acknowledged Examiner's Signature | <input type="checkbox"/> Met after Allowance Initials | STATE OR COUNTRY ITALY | SHEETS DRAWINGS 5 | TOTAL CLAIMS 20 | INDEPENDENT CLAIMS 1 |
| ADDRESS YOUNG & THOMPSON 209 Madison Street Suite 500 ALEXANDRIA, VA 22314 UNITED STATES | | | | | |
| TITLE Disposable syringe with retractile needle | | | | | |
| FILING FEE RECEIVED 515 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |